PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

ppropriate. All further ndicated unless correcte naintenance fee notificate	correspondence including de below or directed other tions.	g the Patent, advance or erwise in Block 1, by (a	ders and notification of n specifying a new corres	naintenance fees w pondence address;	ill be mailed and/or (b) in	I to the current of t	correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDE	Fee(Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
UNILEVER IN 700 SYLVAN A BLDG C2 SOUT	UP I her	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
ENGLEWOOD CLIFFS, NJ 07632-3100				(Depositor's name)				
					WANDOWS AND		(Signature)	
							(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/535,485	35,485 05/17/2005		Deborah Jane Cooke	ooke		C4265(C) 3943		
TITLE OF INVENTION	: METHOD OF LAUNE	DERING COLOURED FA	ABRICS					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TO	ΓAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$300	\$0		\$1740	05/12/2008	
EXAM	INER	ART UNIT	CLASS-SUBCLASS					
KHAN, AMINA S		1796	008-137000	•				
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON			or agents OR, alternation (2) the name of a single registered attorney or a 2 registered patent attollisted, no name will be	of up to 3 registered patent attorneys alternatively, of a single firm (having as a member a rney or agent) and the names of up to atent attorneys or agents. If no name is e will be printed.				
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Unilever Home & Personal Care USA Greenwich, CT								
Division of Conopco, Inc. Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government								
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual 🚨 Co	orporation or	other private gro	up entity Government	
	tus (from status indicate		☐ b. Applicant is no lon	an alaiming SMAI	I I ENITITY	atotus Soc 37 CE	P 1 27(a)(2)	
NOTE: The Issue Fee an	ns SMALL ENTITY stated of Publication Fee (if required)	uired) will not be accepte	d from anyone other than t				e assignee or other party in	
nterest as shown by the Authorized Signature	records of the United Sta	ites Patent and Trademark	Office.	Date	Van.	f 18. 2	' 00 R	
Typed or printed name Alan A. Bornstein Registration No. 40,919								
01.1 11 0.1 0	11 27 (2000 1 2 1 1 201 1 2	on is required to obtain or 1.14. This collection is es to depending upon the indivice Chief Information Office COMPLETED FORMS To	retain a benefit by t timated to take 12 vidual case. Any co er, U.S. Patent and O THIS ADDRESS	he public when inutes to comments on the Trademark (S. SEND TO	ich is to file (and omplete, including the amount of tin Office, U.S. Depa : Commissioner f	by the USPTO to process) g gathering, preparing, and ne you require to complete rtment of Commerce, P.O. for Patents, P.O. Box 1450,	

Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.